## WATER WELL RECORD KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

The statement of well location if in city of the statement of the statemen					
Distinction from near them as city:  The section bear with the city of the section bear of the section bea	I #'		1		Township number Range number
Distinction from near them as city:  The section bear with the city of the section bear of the section bea	Location of well:	1/4/12/1/4511/4	/	3,	T 305 s R (5/W)
Locate with "X" in section below the state of the state o	2. Distance and direction from nearest town or city:		ner of well:	m	w. Vant Leven
Locate with "X" in section belong with the section with the section belong with the section with the se	2/2/2	with le R.R. o	r street:	Ý	e R. #1/1/1
Well depth	treet address of well location if in city:	edawers) city,	state, zip c	ode: 🌠	Gille, Plaine, Kansa
Well depth	Locate with "X" in section below?	Sket map:	- )	1	6. Bore hole dia in. Completion date
Solow rod_Isted   Does   Reverse rotary		line in the	ン		Well depth 37 ft. 5-12-76
Solow rod_Isted   Does   Reverse rotary	CITY ON THE	Olar Sol			7 Cable tool Rotary Driven Dug
S. User: Domestic Public apply Industry    Validation   State   State	NW NE   DECEMB 73	such fu.			
Common   Cit Fall water   Other					8. Use: Domestic Public supply Industry
9. Casing Marterial Welded Schottes.  In 1 Mile  I ye and color of meterial  From To Dise In. to In. depth flywell Thickness: lighter or Disease. In. to In. depth flywell Thickness: lighter or Disease. In. to In. depth flywell Thickness: lighter or Disease. In. to In. depth flywell Thickness: lighter or Disease. In. to In. depth flywell Thickness: lighter or Disease. In. to In. depth flywell Thickness: lighter or Disease. In. to In. depth flywell Thickness: lighter or Disease. In. to In. depth flywell Thickness: lighter or Disease. In. depth flywell Thickness: lighter or Disease. In. depth flywell Thickness is depth or Disease. In. depth flywell Thickness depth or Disease. In. depth flywell Thickness deven goods. In. depth flywell distinfected good completion:  In the depth flywell Thickness deven goods. In. depth flywell distinfected good completion:  In the depth flywell Thickness deven goods. In. depth flywell distinfected good completion:  In the depth flywell Thickness deven goods. In. depth flywell distinfected good completion:  In the depth flywell Thickness deven goods. In. depth flywell distinfected good completion? Inches deven goods. Inches deven goods. In. depth flywell distinfected good completion? Inches deven goods. Inches deve	W   1   1   E				Irrigation Air conditioning Stock
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Jandy Japail  Jandy Japail  John Jand Jr. And	. Type and color of indicator				
Solutions   Solution	Sandy Janie!		1	2	Sunflewer & lastic
Set between	varing supaine				
Grovel pack Least range of material Least range of mat	Place.		3	10	17
11. State water level:	N. V. V. I				ft. andft.
## The blow land surface Date    Pumping level below land surfaces	Line sand		10	15	
12. Pumping level balow land surfaces:   12. Pumping level balow land surfaces:   13. Pumping level balow land surfaces:   14. after	Madina Sand	,	15	74	11. State water level: mo./day/yr.
ft. ofter hrs. pumpingg.p.m.	Theman Suna		1 /	J.7	
### Concrete Statement Secretary Concrete Secretary Concretary Concrete Secretary Concrete Secretary Concretary Concretary Concretary Concretary Concretary Concretary Concretary Concrete Secretary Concretary Concr	Shale		34	37	1 '.'. 1
Estimated maximum yield					
Yes No Date			+		
14. Well head completion:  Pitless adapter Inches above grade  15. Well grouted?  With: Neat cempst Beptonite Concrete Depth: From To Joff.  16. Nearest source of passible contaminations Panel  ft. Direction Type Well disinfected upon completion? Yes No  17. Pump: Not installed Manufacturer's name Model number HP Volts Length of drop pipe ft. capacity g.p.m.  Type:					13. Water sample submitted: mo./day/yr.
Pitless adapter Inches above grade  15. Well grouted?  With:Near tempetBentoniteConcrete Depth: From					Yes No Date
15. Well grouted?  With:Neat compatBentoniteConcreteDepth: From			$\perp$		
With: Neat compate Bentonite Concrete Depth: From 10 to 14 ft.  16. Nearest source of possible contamination of the Depth: From 15 to 14 ft.  16. Nearest source of possible contamination of the Depth: From 15 to 14 ft.  16. Nearest source of possible contamination of the Depth: From 15 to 14 ft.  16. Nearest source of possible contamination of the Depth: From 15 to 15 t					
Depth: From ## to ## to ## ft.  16. Nearest source of possible contamination ## purple ft			1		
16. Nearest source of possible contamination 1900  ft					
ft Direction Type   Well disinfected upon completion? Yes No					
Well disinfected upon completion? YesNo  17. Pump:Not installed  Manufacturer's name  Model number HP Volts  Length of drop pipe ft. capacity g.p.m.  Type: Submersible Turbine  Submersible Turbine  Jet Reciprocating  Other Centrifugal Other  Oppography: Oppography: Centrifugal			+		ft Direction Type
Manufacturer's name  Model number HP Volts Length of drop pipe ft. capacity g.p.m.  Type:     Submersible Turbine     Jet Reciprocating     Centrifugal Other  B. Elevation:  19. Remarks:					Well disinfected upon completion? YesNo
Model number HP			1 1		
Length of drop pipeft. capacityg.p.m.  Type: Submersible Turbine Submersible Reciprocating Centrifugal Other  B. Elevation:  19. Remarks: # Lat ** Leaune*  appropriate			+		1
Type:  Submersible  Jet  Reciprocating  Centrifugal  19. Remarks:   Turbine  Reciprocating  Centrifugal  20. Water well contractor's certification:  This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief,  This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief,  Business game  License No.  Address License No.  Address License No.  Signed M. Annald Date  Signed M. Annald Date					
SubmersibleTurbineJetReciprocatingCentrifugalOther  B. Elevation:  19. Remarks: # Lat ! Laure  opography: HillSlopeUpland  License No. Address ! License No. Address ! License No. Address ! License No. Address ! License No. Signed M. Aurald  Date Date		A	+		
(Use a second/sheet if needed)  G. Elevation:  19. Remarks:   19.					Submersible Turbine
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